

STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

COVER PAGE

Filed Date: 03/27/2014 06:29 PM
SAN: 031400068-STH-0068

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Dear James L

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Carson
Division, Board, Department, District, if applicable Your Position
Elected and Appointed Mayor
▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Agency: SEE ATTACHED LIST Position:

2. Jurisdiction of Office (Check at least one box)

- State Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County _____ County of _____
- City of Carson _____ Other _____

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2013, through December 31, 2013. Leaving Office: Date Left ____/____/_____
(Check one)
- or- The period covered is ____/____/_____, through December 31, 2013. The period covered is January 1, 2013, through the date of leaving office.
- Assuming Office: Date assumed ____/____/_____. The period covered is ____/____/_____, through the date of leaving office.
- Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

- Check applicable schedules or "None." ▶ Total number of pages including this cover page: 3
- Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached
 - Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached
 - Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached
- or-
 None - No reportable interests on any schedule

5. Verification



I certify under penalty of perjury under the laws of the State of

Date Signed 03/27/2014 06:29 PM
(month, day, year)

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
EXPANDED STATEMENT LIST

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
James Dear

Agency	Position or Title	Jurisdiction	Type of Statement	Period Covered
Carson Successor Agency	Agency Chairman	Other Successor Agency of Carson	Annual	01/01/13 - 12/31/13
Carson Housing Authority	Authority Chairman	Other Carson Housing Authority	Annual	01/01/13 - 12/31/13

SCHEDULE D
Income – Gifts

Name
James Dear

▶ NAME OF SOURCE *(Not an Acronym)*
Philippine American Bar Association
 ADDRESS *(Business Address Acceptable)*
PO Box 63, Pasadena, CA 91162
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 15 / 13</u>	<u>\$ 60.00</u>	<u>dinner ticket</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE *(Not an Acronym)*
 ADDRESS *(Business Address Acceptable)*
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
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Comments: _____